

**PCT  
REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

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International Application No.
International Filing Date
(Receipt Stamp) PCT / 29.8.03 / RECEIPT STAMP

Applicant's or Agent's file reference  
(if desired, 12 characters maximum): FNB357PCT

<b>Box No. I Title of Invention:</b>	
MICRO GAS GENERATOR WITH AUTOMATIC IGNITION FUNCTION	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor	
Name and address: (family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)	Telephone No. 03-3237-5234
NIPPON KAYAKU KABUSHIKI KAISHA 11-2, Fujimi 1-chome, Chiyoda-ku, Tokyo 102-8172 Japan	Facsimile No. 03-3237-5097
	Telecopier No.
	Applicant's registration No. with the Office
State (that is, country) of nationality: JAPAN	State (that is, country) of residence: JAPAN
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America	<input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
Name and address: (family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (if this check-box is marked, do not fill in below)
KODAMA, Ryoi 3903-39, Toyotomi, Toyotomi-cho, Himeji-shi, Hyogo 679-2123 Japan	Applicant's registration No. with the Office
State (that is, country) of nationality: JAPAN	State (that is, country) of residence: JAPAN
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America	<input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>	
The person identified bellow is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities <input type="checkbox"/> agent <input type="checkbox"/> common representative:	
Name and address: (family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)	Telephone No.
	Facsimile No.
	Telecopier No.
	Applicant's registration No. with the Office
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Continuation of Box III		FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>			
Name and address: <i>(family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)</i>		This person is:	
KURITA, Kazumasa 3903-39, Toyotomi, Toyotomi-cho, Himeji-shi, Hyogo 679-2123 Japan		<input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(if this check-box is marked, do not fill in below)</i>	
State <i>(that is, country)</i> of nationality: JAPAN		Applicant's registration No. with the Office	
State <i>(that is, country)</i> of residence: JAPAN			
This person is applicant for the purposes of:		<input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)</i>		This person is:	
IKEDA, Kenjiro 3903-39, Toyotomi, Toyotomi-cho, Himeji-shi, Hyogo 679-2123 Japan		<input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(if this check-box is marked, do not fill in below)</i>	
State <i>(that is, country)</i> of nationality: JAPAN		Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality: JAPAN			
This person is applicant for the purposes of:		<input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)</i>		This person is:	
		<input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(if this check-box is marked, do not fill in below)</i>	
State <i>(that is, country)</i> of nationality:		Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:			
This person is applicant for the purposes of:		<input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)</i>		This person is:	
		<input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(if this check-box is marked, do not fill in below)</i>	
State <i>(that is, country)</i> of nationality:		Applicant's registration No. with the Office	
State <i>(that is, country)</i> of nationality:			
This person is applicant for the purposes of:		<input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: <i>(family name followed by give name; for a legal entity, full official designation; The address must include postal code and name of country)</i>		This person is:	
		<input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(if this check-box is marked, do not fill in below)</i>	
State <i>(that is, country)</i> of nationality:		Applicant's registration No. with the Office	
State <i>(that is, country)</i> of residence:			
This person is applicant for the purposes of:		<input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.			

<b>Box No. V DESIGNATION OF STATES</b>		
<i>Mark the applicable check-box below; at least one must be marked.</i>		
The following designations are hereby made under Rule 4.9(a). If other kind of protection or treatment desired. Specify in the box for addition.		
<b>Regional Patent</b>		
<input checked="" type="checkbox"/> <b>AP</b>	<b>ARIPO Patent:</b> GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT (if other kind of protection or treatment desired, specify on dotted line)	
<input checked="" type="checkbox"/> <b>EA</b>	<b>Eurasian Patent:</b> AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT	
<input checked="" type="checkbox"/> <b>EP</b>	<b>European Patent:</b> AT Austria, BE Belgium, BG Bulgaria, CH&LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, HU Hungary, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, RO Romania, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey, and other State which is a Contracting State of the European Patent Convention and of the PCT	
<input checked="" type="checkbox"/> <b>OA</b>	<b>OAPI Patent:</b> BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GQ Equatorial Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)	
<b>National Patent (if other kind of protection or treatment desired, specify on dotted line):</b>		
<input checked="" type="checkbox"/> <b>AE</b> United Arab Emirates.....	<input checked="" type="checkbox"/> <b>GH</b> Ghana.....	<input checked="" type="checkbox"/> <b>OM</b> Oman
<input checked="" type="checkbox"/> <b>AG</b> Antigua and Barbuda.....	<input checked="" type="checkbox"/> <b>GM</b> Gambia	<input checked="" type="checkbox"/> <b>PG</b> Papua New Guinea
<input checked="" type="checkbox"/> <b>AL</b> Albania.....	<input checked="" type="checkbox"/> <b>HR</b> Croatia.....	<input checked="" type="checkbox"/> <b>PH</b> Philippines.....
<input checked="" type="checkbox"/> <b>AM</b> Armenia.....	<input checked="" type="checkbox"/> <b>HU</b> Hungary.....	<input checked="" type="checkbox"/> <b>PL</b> Poland.....
<input checked="" type="checkbox"/> <b>AT</b> Austria.....	<input checked="" type="checkbox"/> <b>ID</b> Indonesia	<input checked="" type="checkbox"/> <b>PT</b> Portugal.....
<input checked="" type="checkbox"/> <b>AU</b> Australia.....	<input checked="" type="checkbox"/> <b>IL</b> Israel.....	<input checked="" type="checkbox"/> <b>RO</b> Romania
<input checked="" type="checkbox"/> <b>AZ</b> Azerbaijan.....	<input checked="" type="checkbox"/> <b>IN</b> India.....	<input checked="" type="checkbox"/> <b>RU</b> Russian Federation.....
<input checked="" type="checkbox"/> <b>BA</b> Bosnia and Herzegovina.....	<input checked="" type="checkbox"/> <b>IS</b> Iceland	<input checked="" type="checkbox"/> <b>SC</b> Seychells
<input checked="" type="checkbox"/> <b>BB</b> Barbados	<input checked="" type="checkbox"/> <b>JP</b> Japan.....	<input checked="" type="checkbox"/> <b>SD</b> Sudan
<input checked="" type="checkbox"/> <b>BG</b> Bulgaria.....	<input checked="" type="checkbox"/> <b>KE</b> Kenya.....	<input checked="" type="checkbox"/> <b>SE</b> Sweden
<input checked="" type="checkbox"/> <b>BR</b> Brazil.....	<input checked="" type="checkbox"/> <b>KG</b> Kyrgyzstan....	<input checked="" type="checkbox"/> <b>SG</b> Singapore
<input checked="" type="checkbox"/> <b>BY</b> Belarus.....	<input checked="" type="checkbox"/> <b>KP</b> Democratic People's Republic of Korea	<input checked="" type="checkbox"/> <b>SK</b> Slovakia.....
<input checked="" type="checkbox"/> <b>BZ</b> Belize.....	<input checked="" type="checkbox"/> <b>KR</b> Republic of Korea.....	<input checked="" type="checkbox"/> <b>SL</b> Sierra Leone
<input checked="" type="checkbox"/> <b>CA</b> Canada	<input checked="" type="checkbox"/> <b>KZ</b> Kazakhstan.....	<input checked="" type="checkbox"/> <b>SY</b> Syrian Arab Republic
<input checked="" type="checkbox"/> <b>CH</b> Switzerland and Liechtenstein	<input checked="" type="checkbox"/> <b>LC</b> Saint Lucia .....	<input checked="" type="checkbox"/> <b>TJ</b> Tajikistan
<input checked="" type="checkbox"/> <b>CN</b> China.....	<input checked="" type="checkbox"/> <b>LK</b> Sri Lanka	<input checked="" type="checkbox"/> <b>TM</b> Turkmenistan.....
<input checked="" type="checkbox"/> <b>CO</b> Colombia	<input checked="" type="checkbox"/> <b>LR</b> Liberia	<input checked="" type="checkbox"/> <b>TN</b> Tunisia
<input checked="" type="checkbox"/> <b>CR</b> Costa Rica.....	<input checked="" type="checkbox"/> <b>LS</b> Lesotho.....	<input checked="" type="checkbox"/> <b>TR</b> Turkey.....
<input checked="" type="checkbox"/> <b>CU</b> Cuba.....	<input checked="" type="checkbox"/> <b>LT</b> Lithuania	<input checked="" type="checkbox"/> <b>TT</b> Trinidad and Tobago.....
<input checked="" type="checkbox"/> <b>CZ</b> Czech Republic....	<input checked="" type="checkbox"/> <b>LU</b> Luxembourg	<input checked="" type="checkbox"/> <b>TZ</b> United Republic of Tanzania
<input checked="" type="checkbox"/> <b>DE</b> Germany.....	<input checked="" type="checkbox"/> <b>LV</b> Latvia	<input checked="" type="checkbox"/> <b>UA</b> Ukraine.....
<input checked="" type="checkbox"/> <b>DK</b> Denmark.....	<input checked="" type="checkbox"/> <b>MA</b> Morocco.....	<input checked="" type="checkbox"/> <b>UG</b> Uganda.....
	<input checked="" type="checkbox"/> <b>MD</b> Republic of Moldova.....	<input checked="" type="checkbox"/> <b>US</b> United States of America.....

Sheet No. 3 (page 2 of 2)

<input checked="" type="checkbox"/> DM	Dominica	<input checked="" type="checkbox"/> MG	Madagascar.....	<input checked="" type="checkbox"/> UZ	Uzbekistan.....
<input checked="" type="checkbox"/> DZ	Algeria.....	<input checked="" type="checkbox"/> MK	The former Yugoslav Republic of Macedonia.....	<input checked="" type="checkbox"/> VC	Saint Vincent and the Grenadines
<input checked="" type="checkbox"/> EC	Equador.....	<input checked="" type="checkbox"/> MN	Mongolia	<input checked="" type="checkbox"/> VN	Viet Nam.....
<input checked="" type="checkbox"/> EE	Estonia.....	<input checked="" type="checkbox"/> MW	Malawi.....	<input checked="" type="checkbox"/> YU	Serbia and Montenegro ...
<input checked="" type="checkbox"/> ES	Spain.....	<input checked="" type="checkbox"/> MX	Mexico.....	<input checked="" type="checkbox"/> ZA	South Africa .....
<input checked="" type="checkbox"/> FI	Finland.....	<input checked="" type="checkbox"/> MZ	Mozambique	<input checked="" type="checkbox"/> ZM	Zambia
<input checked="" type="checkbox"/> GB	United Kingdom	<input checked="" type="checkbox"/> NI	Nicaragua	<input checked="" type="checkbox"/> ZW	Zimbabwe.....
<input checked="" type="checkbox"/> GD	Grenada	<input checked="" type="checkbox"/> NO	Norway		
<input checked="" type="checkbox"/> GE	Georgia.....	<input checked="" type="checkbox"/> NZ	New Zealand.....		

Check-boxes below reserved for designating States which have become party to the PCT after issuance of this sheet.

☐..... ☐..... ☐.....

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation, which includes submission of written notice specifying the designations, accompanied by designation fees, as well as confirmation fee, must reach the receiving Office within the 15-month time limit.)

Box VI PRIORITY CLAIM				
The priority of the following earlier application(s) is being claimed:				
Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country	regional application: *regional Office	international application: receiving Office
Item (1) 30.08.02	Patent Application No. 2002-252835	Japan		
Item (2)				
Item (3)				
Item (4)				
Item (5)				
<input type="checkbox"/> Further priority claim are indicated in the Supplemental Box.				
The receiving Office is requested to prepare and transmit the International Bureau a certified copy of the earlier application(s) <i>(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)</i> identified above as:				
<input checked="" type="checkbox"/> all items <input type="checkbox"/> item (1) <input type="checkbox"/> item (2)				
<input type="checkbox"/> item (3) <input type="checkbox"/> item (4) <input type="checkbox"/> item (5)				
<input type="checkbox"/> other, see Supplemental Box				
<i>*Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)) :.....</i>				
Box No. VII INTERNATIONAL SEARCHING AUTHORITY				
Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search. Indicate the Authority chosen; the two-letter code may be used:				
ISA / JP.....				
Request to use results of earlier searches; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):				
Filing Date (day/month/year)		Number	Country (or regional Office)	
Box No. VIII DECLARATIONS				
The following declarations are contained in Boxes No. VIII(i) to (V) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):				Number of declarations
<input type="checkbox"/> Box No. VIII(i)	Declaration as to the identity of the inventor			: _____
<input type="checkbox"/> Box No. VIII(ii)	Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent			: _____
<input type="checkbox"/> Box No. VIII(iii)	Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application			: _____
<input type="checkbox"/> Box No. VIII(iv)	Declaration of inventorship (only for the purposes of the designation of the United States of America)			: _____
<input type="checkbox"/> Box No. VIII(v)	Declaration as to non-prejudicial disclosures or exceptions to lack of novelty			: _____

Box No. IX CHECK LIST; LANGUAGE OF FILING	
<p>This international application contains:</p> <p>a) the following number of sheets in paper form:</p> <p>request (including declaration sheets).....5</p> <p>description (excluding sequence listing part).....15</p> <p>claims.....1</p> <p>abstract.....1</p> <p>drawings.....4</p> <p>Sub-total number of sheets.....26</p> <p>Sequence listing part of description (actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (b) below)</p> <p>.....</p> <p>Total number of sheets.....</p> <p>(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the</p> <p><input type="checkbox"/> sequence listing: .....</p> <p><input type="checkbox"/> tables related thereto: .....</p> <p><i>(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)</i></p>	<p>This international application is accompanied by the following item(s):</p> <p>1. <input checked="" type="checkbox"/> fee calculation sheet ..... : .....</p> <p><input checked="" type="checkbox"/> sheet affixed with patent stamp corresponding to fee to be paid..... : .....</p> <p><input checked="" type="checkbox"/> sheet proving remittance to the account of the International Bureau..... : .....</p> <p>2. <input type="checkbox"/> original separate power of attorney... : .....</p> <p>3. <input type="checkbox"/> original general power of attorney ..... : .....</p> <p>4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: .....</p> <p>5. <input type="checkbox"/> statement explaining lack of seal..... : .....</p> <p>6. <input type="checkbox"/> priority document(s) identified in Box No. as item(s) : .....</p> <p>7. <input type="checkbox"/> translation of international application into (language): .....</p> <p>8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material: ..... : .....</p> <p>9. <input type="checkbox"/> sequence listing in computer readable form (indicate also type and number of carriers)</p> <p>(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) ..... : .....</p> <p>(ii) <input type="checkbox"/> (only where check-box(b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter..... : .....</p> <p>(iii) <input type="checkbox"/> together with relevant statements as to the identity of the copy or copies with the sequence listing part mentioned in left column..... : .....</p> <p>10. <input type="checkbox"/> tables in computer readable form related to sequence listing (<i>indicate type and number of carriers</i>) ..... : .....</p> <p>(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) ..... : .....</p> <p>(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) : ... : .....</p> <p>(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column : .....</p> <p>11. <input type="checkbox"/> other (specify): .....</p>
Figure of the drawings which should accompany the abstract:	Language of filing of the international application: Japanese
Box No. X NAME (APPELLATION) AND SEAL OF APPLICATN, AGENT OR COMMON REPRESENTATIVE	
Next to each name (appellation), affix his or her (its) seal.	
NIPPON KAYAKU KABUSHIKI KAISHA (Seal)	
KODAMA, Ryoji (Seal)	KURITA, Kazumasa (Seal) IKEDA, Kenjiro (Seal)

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1. Date of actual receipt of the purported International application;		2. Drawings:  <input type="checkbox"/> Received:  <input type="checkbox"/> Not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application;		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA/JP	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

International Bureau Use Only

Date of receipt of the record copy by the International Bureau:
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